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TOWN OF DAVIE
Town Clerk's Office

02-10-12 P02:49 RCVD

**ELECTIONEERING COMMUNICATION
STATEMENT OF ORGANIZATION**

(PLEASE TYPE)

OFFICE USE ONLY

1. Full Name of OrganizationA Better Future for our Town, Inc. *JB*

Telephone

813-541-6897

Mailing Address (include city, state and zip code)

126 Sidonia Ave #7, Coral Gables, FL 33134

Street Address (include city, state and zip code)

same

2. Affiliated or Connected OrganizationsName of Affiliated or
Connected Organization

Mailing Address

Relationship

N/A

3. Area, Scope and Jurisdiction of the Organization

Municipal candidates - Davie, Florida

4. Identify by Name, Address & Position, the Custodian of Books & Accounts for the Organization

Full Name

Mailing Address

Street Address

Title or Position

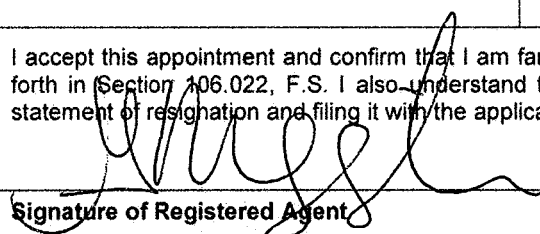
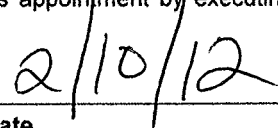
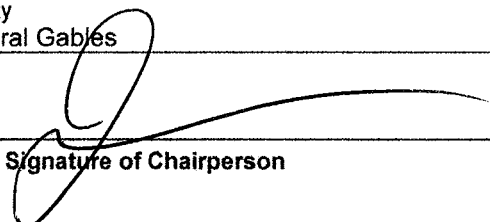
Gloria Maggiolo

2121 Ponce de Leon,
Suite 1100
Coral Gables, FL 33134

same

Treasurer

5. This Organization was formed (check applicable box): (Calendar quarters end the last day of March, June, September, and December.)☒ As a newly created organization during the current calendar quarter.☐ From an organization existing prior to the current calendar quarter.

REGISTERED AGENT STATEMENT OF APPOINTMENT (Section 106.022, F.S.)		OFFICE USE ONLY			
<input checked="" type="checkbox"/> Original Appointment <input type="checkbox"/> Change of Appointment <input type="checkbox"/> Change of Mailing Address <input type="checkbox"/> Change of Physical Address					
Registered Agent and Office Information					
Name Gloria Maggiolo				Telephone 305-442-2200	
Street Address 2121 Ponce de Leon, Suite 1100					
City Coral Gables				State FL	
Zip Code 33134		Mailing Address same			
City		State			
Zip Code		I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.			
 Signature of Registered Agent		 Date			
Former Registered Agent and Office Information (for changes only)					
Name		Telephone			
Street Address					
City		State			
Zip Code		Committee or Organization Information			
Name of Committee or Organization A Better Future for our Town, Inc. <i>db</i>					
Street Address 126 Sidonia Ave #7		Telephone 813-541-6897			
City Coral Gables		State FL			
Zip Code 33134		Signature of Chairperson 			
Printed Name of Chairperson Jordan Behlman		Date 2/10/2012			



6. List By Name, Mailing and Street Address, & Position, Other Principal Officers, including the treasurer and deputy treasurer, if any. Include the top-ranking officer's (e.g., chairperson) name and information.

Full Name	Mailing Address	Street Address	Title or Position
Jordan Behlman	126 Sidonia Ave #7 Coral Gables, FL 33134	same	Chairman
Gloria Maggiolo	2121 Ponce de Leon, Suite 11000 Coral Gables, FL 33134	same	Treasurer

7. In the Event of Dissolution, What Disposition will be Made of the Residual Funds?

Return pro rata to contributors or contributed to charity exempt pursuant to 501(c)(3) of IRS Code

8. List All Banks, Safety Deposit Boxes, or Other Depositories Used by this Organization for Electioneering Communications

Name of Bank or Depository	Mailing Address
U.S. Century Bank	3001 Ponce de Leon Blvd., #100 Coral Gables, FL 33134

9. List All Reports Required to be Filed by this Organization with Federal Officials, & the Names, Addresses, & Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
Form 8871 Form 1120-POL Form 990	w/in 24 hours 3 mths after calendar year 5 mths after calendar year	IRS IRS IRS	Ogden, UT Ogden, UT Ogden, UT

STATE OF Florida Miami Dade COUNTY

I, Jordan Behlman, certify that the information in this Statement of

Organization is complete, true, and correct.

X


Signature of Top-ranking Principal Officer of Organization

2/10/2012

Date